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Bib Data Sheet

CONFIRMATION NO. 3906

SERIAL NUMBER 10/709,907	FILING OR 371(c) DATE 06/04/2004 RULE	CLASS 430	GROUP ART UNIT 1756	ATTORNEY DOCKET NO. BUR920040156US1
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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 07/14/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 7	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Met after Allowance			
Verified and Acknowledged	<i>[Signature]</i>	Examiner's Signature	Initials		

## ADDRESS

29154

## TITLE

FORMATION OF METAL-INSULATOR-METAL CAPACITOR SIMULTANEOUSLY WITH ALUMINUM METAL WIRING LEVEL USING A HARDMASK

FILING FEE RECEIVED 1000	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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